



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED

04 JUL 14 PM 4:37

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

<p>3. This Statement covers from <u>04/12/04</u> to <u>06/07/04</u></p> <p style="text-align: center; font-size: small;">Mo Day Year Mo Day Year</p>	
<p>1. Committee I.D. Number <u>137416</u></p> <p>2. Committee Name <u>Committee To Elect</u> <u>Gregory Murray</u></p> <p>5. Committee's Mailing Address <u>33985 Harper #101</u> <u>Clinton Township MI 48035</u> Area Code and Phone <u>586 32102330</u></p> <p style="font-size: x-small;">If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>	<p>4. Candidate Last Name First Name M.I. <u>Murray</u> <u>Gregory</u> <u>A</u></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <u>School Board (Mt. Clemens)</u></p> <p>4b. County of Residence <u>Macomb</u></p>
<p>7. Treasurer's Business Address <u>Same As Above</u></p> <p>Area Code and Phone () _____</p>	<p>6. Treasurer's Name & Residential Address <u>Same As Above</u></p> <p>Area Code & Phone () _____</p>
<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)</p> <p>Area Code and Phone () _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Convention <input checked="" type="checkbox"/> School</p> <p><input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> </div> <div style="width: 50%;"> <p>9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year)</p> <p>9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p> <p>9e. <input type="checkbox"/> Dissolution of Candidate Committee</p> <p style="text-align: right;">Effective Date of Dissolution</p> <p style="text-align: right;">Month Day Year</p> </div> </div> <p>Date of Election, Convention or Caucus <u>06</u> <u>14</u> <u>04</u> Month Day Year</p> <p style="font-size: x-small;">By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p style="font-size: x-small;">A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.</p>	
<p>10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p>	
<p>Current Treasurer or Designated Record keeper <u>Gregory Murray</u> Signature <u>[Signature]</u> Date <u>06/07/04</u></p> <p style="text-align: center; font-size: x-small;">Type or Print Name Signature Mo Day Year</p>	
<p>Candidate <u>Gregory A. Murray</u> Signature <u>[Signature]</u> Date <u>06/07/04</u></p> <p style="text-align: center; font-size: x-small;">Type or Print Name Signature Mo Day Year</p>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137416
2. Committee Name Committee To Elect Gregory Murray

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/07/04</u></p> <p>Name: <u>Gregory A. Murray</u></p> <p>Address: <u>62 Rushbone Mt. Clever 48043</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Sold Employee</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		128.53	328.53
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>			
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>			
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>			
<p>Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)</p>		128.53	

Enter this total on
line 3 of Summary
Page.